U.S. Petent and Tradement Office; U.S. DEPARTMENT OF COMMERCE

PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 Effective December 8, 2004									Application of Godglass formed 4		
	A	PPLICATION (Col	AS FILE		lumn 2)		SMÁLL E	NTITY	OR	OTHER SMALL	
	FOR	NUMB	ER FILED	NUMBE	ER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (1)
BASIC FEE (37 CFR 1 18(4) (5) 0 (6))			N/A		NIA		NVA	150.00		N/A .	300.00
SEARCH FEE (37 CFR 1:16(N), (4, or [m])			NA		NIA		N/A . ·	\$250		N/A	\$500
EXAMINATION FEE		·.	N/A		· · N/A		NVA	\$100		N/A	\$200
TOTAL CLAIMS			minus 20 =				X\$ 25 .		OR.	X\$50 .	
D7.OFR 1 16(1) INDEPENDENT CLAIMS		ims	minus 3 =				X100 .		1	X200 .	
APPLICATION SIZE sheets of paper, the application small				n and drawings of he application's small entity) for els or fraction th	ill entity) for each or fraction thereof. See			:			
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1 16(J))						1	. +180=		1	+360=	,
	If the difference in column 1 is less than zero, enter "O" in column 2.						TOTAL] , •	TOTAL .	
APPLICATION AS AMENDED - PART II (Column 1) (Column 2) (Column 3):							SMALL ENTITY OR OTHER THAN SMALL ENTITY				
۲A	•	CLAIMS REMAINING AFTER AMENDMENT	ŀ	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDI- TIONAL FEE (\$)		RATE (S)	ADD(+ TIONAL FEE (\$)
FEN	Total or cen Line	29	Minus	70	- 9		X\$ 25 .		OR	X\$50 _	
ENDA	Independent - OF CFR 1.18(N)	. 1	Minus	1 5	= _		X100 _		OR	X200 _	
	Application Size Fee (37 CFR 1.16(s))]					
	FIRST PRESENT	ATION OF MULTIPL	E DEPEND	ENT CLAIM D7 CF	R 1.16(0)]	+180=		OR	+360=	
	· · · · · · · · · · · · · · · · · · ·				•		ADD'L FEE		OR	TOTAL ADD'L FEE	
٠		(Column 1)		(Column 2)	(Column 3)			·			·
8		CLAIMS REMAINING AFTER. AMENDMENT	:	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (S)	ADDI- TIONAL FEE (S)		RATE (\$)	ADOI- TIONAL FEE (\$)
Į	Total profes Liam	•	Minus	••	в.		X\$ 25 .		OR .	X\$50 =	
AMENDMENT	Independent (37 CFR 1.19(h))	•	Minus ·	•••	c		X100 _		OR ·	X200	
뛼	Application Size Fee (37 CFR 1.16(s))									.000	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16())						+180=		OR	+360=	
<u>₹</u>	AMOLINCACIO										

If the Trighest Number Previously Paid For' IN THIS SPACE is less than 3, enter 3.

The Trighest Number Previously Paid For' (Total or Independent) is the highest number found in the appropriate box in column 1.

is collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the PTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete buding gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the Individual case. Any comments the amount of lime you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patient 1 Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450.

DRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.